

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

09/851885

CLAIMS AS FILED - PART I

10.14.04

(Column 1)

(Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	121 minus 21 = *	φ
INDEPENDENT CLAIMS	8 minus 8 = *	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

R.C.E.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	790.00
X\$ 9=		OR	X\$18=	
X43=		OR	X88=	
+140=		OR	+ =	
TOTAL		OR	TOTAL	790.

CLAIMS AS AMENDED - PART II

10.15.04

(Column 1)

(Column 2)

(Column 3)

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 92	Minus	** 121	= φ
Independent	* 4	Minus	*** 8	= φ
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input checked="" type="checkbox"/>				

Amse

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ =		OR	X\$18 =	
X =		OR	X88 =	
+ =		OR	+300 =	300.
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	300.

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ =		OR	X\$ =	
X =		OR	X =	
+ =		OR	+ =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ =		OR	X\$ =	
X =		OR	X =	
+ =		OR	+ =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

**This Page is Inserted by IFW Indexing and Scanning
Operations and is not part of the Official Record**

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images include but are not limited to the items checked:

- ☐ **BLACK BORDERS**
- ☐ **IMAGE CUT OFF AT TOP, BOTTOM OR SIDES**
- ☐ **FADED TEXT OR DRAWING**
- ☐ **BLURRED OR ILLEGIBLE TEXT OR DRAWING**
- ☐ **SKEWED/SLANTED IMAGES**
- ☐ **COLOR OR BLACK AND WHITE PHOTOGRAPHS**
- ☐ **GRAY SCALE DOCUMENTS**
- ☐ **LINES OR MARKS ON ORIGINAL DOCUMENT**
- ☐ **REFERENCE(S) OR EXHIBIT(S) SUBMITTED ARE POOR QUALITY**
- ☐ **OTHER:** _____

IMAGES ARE BEST AVAILABLE COPY.

As rescanning these documents will not correct the image problems checked, please do not report these problems to the IFW Image Problem Mailbox.